

The applicant will be asked to certify the truth and accuracy of the answers provided to these compliance review questions.

I, David Cox, hereby certify on behalf of the City of New Bern as applicant's Waste Collections Superintendent (title of position with applicant), that I have read the foregoing answers provided to the Compliance Review, that the information and answers contained in the responses to the Compliance Review are true and accurate based on my own knowledge and my review of documents and that I have not omitted any material information or falsified any information contained in the foregoing answers. I am aware that there are significant penalties for making any false statement, representation, or certification including the possibility of a fine and imprisonment.

Signature/printed name and title:

Attest: David Cox
David Cox, Waste Collections Superintendent

State of NC
County of Craven

Sworn and subscribed to before me this the 2 day of Aug, 2012.

Pamela S. Belrose
notary public

My Commission expires: 9-10-16

